FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number: 3235-0076 Expires: November 20, 2001 Estimated average burden hours per response					
SEC US	SE ONLY				
Prefix	Serial				
DATE RECEIVED					

Name of Offering (check if this is an amend Offering of membership interest in limited liabil	ment and name has changed, and indicate change.) lity company.	/ 171178				
Filing Under (Check box(es) that apply): \square Rul Type of Filing: X New Filing \square Amo	e 504 Rule 505 X Rule 506 Section 4(endment	5) UVOE RECEIVED				
	A. BASIC IDENTIFICATION DATA	// 10D - 9 2002 //				
1. Enter the information requested about the iss	uer	AIII /s/				
Name of Issuer (☐ check if this is an amendme Goodnow Farm LLC	ent and name has changed, and indicate change.)	302 /3/				
Address of Executive Offices C/o Northland Residential Corporation	(Number and Street, City, State, Zip Code) 2150 Washington St, Suite 250, Newton, MA 02462	Telephone Number (Including Area Code) (617) 641-6700				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
Brief Description of Business To acquire, improve, own, operate, lease, refinance & sell or otherwise dispose of a land subdivision in Sudbury, Massachusetts known as Goodnow Farm PROCESCED						
Type of Business Organization	0.45	- 1°7 2002				
☐ corporation ☐ business trust	☐ limited partnership, already formed ☐ limited partnership, to be formed ☐	R 17 2002x other (please specify): LLC				
Actual or Estimated Date of Incorporation or Or	ganization: $\begin{bmatrix} 1 & 1 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 \end{bmatrix}$	HANCIAL Estimated				
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation for Sta	te:				
	CN for Canada; FN for other foreign jurisdiction)	M A				

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offer-ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

BASIC IDENTIFICATION DATA Α. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Northland Residential Limited Liability Company Business or Residence Address (Number and Street, City, State, Zip Code) 2150 Washington Street, Suite 250, Newton, MA 02462 X Director Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner X Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Stewart, Frank M. Business or Residence Address (Number and Street, City, State, Zip Code) 2150 Washington Street, Suite 250, Newton, MA 02462 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Danziger, Robert A. Business or Residence Address (Number and Street, City, State, Zip Code) 2150 Washington Street, Suite 250, Newton, MA 02462 X Director ☐ Beneficial Owner Executive Officer ☐ General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Maslin, Jonathan N. Business or Residence Address (Number and Street, City, State, Zip Code) 16 Lawrence Drive, Short Hills, NJ 07078 ☐ Beneficial Owner X Executive Officer □ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Dawley, John C. Business or Residence Address (Number and Street, City, State, Zip Code) 2150 Washington Street, Suite 250, Newton, MA 02462 □ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Managing Partner Full Name (Last name first, if individual) Pedersen, Lynne B. Business or Residence Address (Number and Street, City, State, Zip Code) 2150 Washington Street, Suite 250, Newton, MA 02462 **Executive Officer** General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Business or Residence Address (Number and Street, City, State, Zip Code)

2150 Washington Street, Suite 250, Newton, MA 02462

Thomas, Richard A.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, Small, Peter M.	if individual)				
Business or Residence Addre One Main Street, Concord, N		reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, Marshall III, John L.	if individual)				
Business or Residence Addre 700 Narraganset Park Drive,	ess (Number and Str Pawtucket, RI 0286	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	X Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, D-W Investments LLC	f individual)				
Business or Residence Addre C/o Winston Partners Inc. O			60606		
Check Box(es) that Apply:	Promoter	X Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Joananne Marshall	f individual)				
Business or Residence Addre 760 Elmgrove Avenue Provi		reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	X Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Park Lane Partners LLC	f individual)				
Business or Residence Addre One Main Street, Concord, N		reet, City, State, Zip Code)	****		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)		<u></u>	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INF	FORMAT	TION AB	OUT OFF	ERING				
1.	Has the	issuer sold.	or does the	e issuer inte	nd to sell, to	non-accrec	dited investor	rs in this offe	ring?				Yes No
		•						2, if filing ur	_				
•	1171	، ، و						z, ii iiiiig ui	idel OLOE.				47. 000
2.					be accepted	·	individual?						\$5,000 Yes No
3.	Does th	e offering p	ermit joint	ownership	of a single u	nit?							x 🗆
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Nor		Last name fi	rst, if indiv	idual)		-				·			
Bus	siness or I	Residence A	ddress (Nu	imber and S	treet, City,	State, Zip C	Code)						
Non	ma of A aa	ociated Bro	Iron on Doo	1									
ivai	ne of Ass	ocialed Bro	oker or Dea	ier									
Stat					Intends to S	Solicit Purch	nasers						
	(Check [AL]	"All States' [AK]	or check i [AZ]	ndividual S [AR]	tates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	
	[IL] [MT]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS] [OR]	[MO]
	[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NЛ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[WY]	[PA] [PR]
Ful	l Name (I	ast name fi	rst, if indiv	idual)				-					
Bus	siness or I	Residence A	Address (Nu	imber and S	treet, City,	State, Zip C	Code)						
Nar	me of Ass	ociated Bro	ker or Dea	ler									
Stat					Intends to S	Solicit Purch	nasers						
	(Check	"All States' [AK]	or check i [AZ]	ndividual S [AR]	tates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	. All States [ID]
	[IL] [MT]	[IN] [NE]	[IA]	[KS] [NH]	[KY]	[LA] [NM]	[MÉ] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MŚ] [OR]	[MO] [PA]
	[RI]	[SC]	[NV] [SD]	[TN]	[NJ] [TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Ful	l Name (I	Last name fi	irst, if indiv	ridual)									
Bus	siness or l	Residence A	Address (Nu	ımber and S	treet, City,	State, Zip C	(ode)						
Nar	me of Ass	ociated Bro	ker or Dea	ler									
Stat				Solicited or ndividual S	Intends to S	Solicit Purch	nasers			-			
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify limited liability company interests)	\$ 2,750,000	\$ 2,750,000
	Total	\$ 2,750,000	\$ 2,750,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>24</u>	\$2,750,000
	Non-accredited Investors	<u>0</u>	\$ <u>0</u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	2	\$
	Regulation A		\$
	Rule 504		s
	Total		<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$ <u>0</u>

	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPER	ISES AND	USE OF PROC	EEDS
		ggregate offering price given in response to Part C - Que to Part C - Question 4.a. This difference is the "adjusted			<u>\$ 2,750,000</u>
5.	of the purposes shown. If the amoun	usted gross proceeds to the issuer used or proposed to be at for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross p Question 4.b above.	check the box	•	
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees			\$	_ 🗆 \$
	Purchase of real estate			\$	X <u>\$ 2,750,000</u>
	Purchase, rental or leasing and in	stallation of machinery and equipment		\$	_ 🗆 \$
	Construction or leasing of plant b	ouildings and facilities		\$	_ 🗆 \$
		including the value of securities involved in this offering assets or securities of another issuer pursuant to a merger		\$	_ 🗆 \$
	Repayment of indebtedness			\$	_ 🗆 \$
	Working capital			\$	_ 🗆 \$
	Other (specify):		□	\$	_ 🗆 \$
				\$	_ 🗆 \$
	Column Totals			\$	\$2,750,000
	Total Payments Listed (column to	otals added)		□ <u>\$ 2,750</u> ,	000
		D. FEDERAL SIGNATURE			
fol	lowing signature constitutes an und	e to be signed by the undersigned duly authorized ertaking by the issuer to furnish to the U.S. Seed by the issuer to any non-accredited investor pursuant to	curities and I	Exchange Commission	
	uer (Print or Type) odnow Farm L.L.C.	Signature Frank M. Stewart	Date	March 1, &	2002
Na	me of Signer (Print or Type)	Title of Signer (Print or Type) President of Northland Residential Corporati	ion		
		Managing General Member of Northland Re	sidential Limi	ted Liability Compan	у
Fra	nk M. Stewart	Managing Member of the Issuer			
		L. Company of the Com		···	

ATTENTION

	E. STATE SIGNATURE							
1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions Yes No of such rule?								
	See Appendix, Column 5, for state response.							
2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3. The undersigned issuer hereby undertakes to fur	rnish to the state administrators, upon written request	t, information furnished by the issuer to offerees.						
	otice is filed and understands that the issuer claiming	sfied to be entitled to the Uniform limited Offering g the availability of this exemption has the burden of						
The issuer has read this notification and knows the authorized person.	e contents to be true and has duly caused this notice	e to be signed on its behalf by the undersigned duly						
Issuer (Print or Type)	Signature	Date						
Goodnow Farm L.L.C.	Frank M. Stewart	March 1, 2002						
Name of Signer (Print or Type)	Title of Signer (Print or Type) President of Northland Residential Corporation							

Managing Member of the Issuer

Managing General Member of Northland Residential Limited Liability Company

Instruction:

Frank M. Stewart

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	APPENDIX								
1	2 3			4					5
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
AL	1 03	110		Investors	Amount	Investors	ranount	103	110
AK	- · · · · · · · ·							·	
AZ									
AR									
CA									
СО									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL		X	limited liability company interest	1	300,000	0			X
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA		X	limited liability company interest	18	1,700,000	0			Х
MI	·								
MN		ļ							
MS									
МО									
MT									

APPENDIX

1		2	3 Type of security		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
	to non-a	to sell accredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
NE								-	
NV									
NH		X	limited liability company interest	1	50,000	0			X
NJ		X	limited liability company interest	1	100,000	0			X
NM									
NY		X	limited liability company interest	1	100,000	0			Х
NC									
ND									
ОН									
OK								·	
OR									
PA									
RI		X	limited liability company interest	2	500,000	0			х
SC									
SD								· · · · · · · · · · · · · · · · · · ·	
TN									
TX									
UT									
VT									
VA							!	·	
WA								: 	
WV									
WI									-
WY									
PR									

Form U-2 Uniform Consent to Service of Process

Know all men by these presents:

That the undersigned Goodnow Farm LLC, a limited liability company organized under the laws of the Commonwealth of Massachusetts, for purposes of complying with the laws of the States indicated hereunder relating to either the registration or sale of securities, hereby irrevocably appoints the officers of the States so designated hereunder and their successors in such offices, its attorney in those States so designated upon whom may be served any notice, process or pleading in any action or proceeding against it arising out of, or in connection with, the sale of securities or out of violation of the aforesaid laws of the States so designated; and the undersigned does hereby consent that any such action or proceeding against it may be commenced in any court of competent jurisdiction and proper venue within the States so designated hereunder by service of process upon the officers so designated with the same effect as if the undersigned was organized or created under the laws of that State and have been served lawfully with process in that State.

It is requested that a copy of any notice, process or pleading served hereunder be mailed to:

Goodnow Farm LLC, c/o Northland Residential Corporation, 2150 Washington Street, Newton, Suite 250, Newton, MA, Attention: Richard A. Thomas, Controller

Place an "X" before the names of all the States for which the person executing this form is appointing the designated Officer of each State as its attorney in that State for receipt of service of process:

AL	Secretary of State	FL	Dept. of Banking and Finance
AK	Administrator of the Division of Banking and Corporations, Department of Commerce and Economic Development	GA	Commissioner of Securities
AZ	The Corporation Commission	GUAM	Administrator, Department of Finance
AR CA	The Securities Commissioner Commissioner of Corporations	HI ID	Commissioner of Securities Director, Department of Finance
CO CT	Securities Commissioner Banking Commissioner	IL IN	Secretary of State Secretary of State
DE DC KY	Securities Commissioner Dept. of Insurance & Securities Regulation Director, Division of Securities	IA KS OH	Commissioner of Insurance Secretary of State Secretary of State
LA	Commissioner of Securities	OR	Director, Department of Insurance and Finance
ME MD	Administrator, Securities Division Commissioner of the Division of Securities	OK PA	Securities Administrator Pennsylvania does not require filing of a Consent to Service of Process
MA	Secretary of State	PR	Commissioner of Financial Institutions
MI	Commissioner, Office of Financial & Insurance Services	X RI	Director of Business Regulation
MN	Commissioner of Commerce	SC	Securities Commissioner
MS	Secretary of State	SD	Director of the Division of Securities

MO	Securities Commissioner	TN	Commissioner of Commerce				
MT	State Auditor and Commissioner of Insurance	TX	and Insurance Securities Commissioner				
NE	Director of Banking and Finance	— _{UT}	Director, Division of Securities				
NV	Secretary of State	VT	Commissioner of Banking, Insurance, Securities & Health				
X NH	Secretary of State	VA	Administration Clerk, State Corporation Commission				
X NJ	Chief, Securities Bureau	WA	Director of the Department of Licensing				
NM	Director, Securities Division	WV	Commissioner of Securities				
X NY	Secretary of State	WI	Commissioner of Securities				
NC	Secretary of State	WY	Secretary of State				
ND	Securities Commissioner						
Dated this LSL day of March, 2002 (SEAL) GOODNOW FARM LLC By Northland Residential Limited Liability Company its Managing Member By Northland Residential Corporation its Managing General Member By Tank M. Stewart, President							
	ACKNOWLEDG	MENT					
County of Mi	Commonwealth of Mas ddlesex) ss.	sachusetts)					
On this 1st day of 1000, 2002, before me 1000 the President of Northland Residential Corporation, appeared Frank M. Stewart, known personally to me to be the President of Northland Residential Corporation, Managing General Member of Northland Residential Limited Liability Company, Managing Member of Goodnow Farm LLC, and acknowledged that he, as an officer being authorized so to do, executed the foregoing instrument for the purposes therein contained, on behalf of said corporation and said limited liability companies, by signing the name of the corporation by himself as an officer.							
IN WITNESS WHEREOF I have hereunto set my hand and official seal.							
Notary Public/Commissioner of Oath My Commission Expires							
(SEAL)							

NOREEN B. KEANE Notary Public My Commission Expires Oct. 15, 2004